

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000078954

FILED
Jan 13, 2004
Secretary of State

Entity Name: 9404 CORPORATION

Current Principal Place of Business:

9404 NW 49 PLACE
SUNRISE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

9404 NW 49 PLACE
SUNRISE, FL 33351 US

New Mailing Address:

FEI Number: 65-0464717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORDON, HOWARD W
100 SE 2ND ST
17TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHWADRON, EVAN
Address: 9404 NW 49 PLACE
City-St-Zip: SUNRISE, FL

Title: PD () Delete
Name: SCHWADRON, JACK
Address: 9404 NW 49 PLACE
City-St-Zip: SUNRISE, FL

Title: VSTD () Delete
Name: SCHWADRON, DAVID
Address: 9404 NW 49 PLACE
City-St-Zip: SUNRISE, FL

Title: D () Delete
Name: LAUREN, LAURIE
Address: 9404 NW 49TH PLACE
City-St-Zip: SUNRISE, FL

Title: D () Delete
Name: SCHREIBER, HELAINE
Address: 9404 NW 49TH PLACE
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID SCHWADRON

VSTD

01/13/2004

Electronic Signature of Signing Officer or Director

_____ Date